PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

112183,121

CLAIMS AS FILED - PART (Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			80				ľ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			6 minus 20=		. 48			X\$ 9=		OR	X\$18=	8.88	
INDEPENDENT CLAIMS			Sminus 3 =		*			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM P			RESENT					+135=		OR	+270=		
-* If	the difference	in column 1 is	less than zero, enter "0" i			olumn 2		TOTAL		OR	TOTAL	1538	
CLAIMS AS AMENDED - PART II								SMALL ENTITY (OTHER THAN R SMALL ENTITY		
		(Column 1) CLAIMS		(Colu	mn 2) IEST	(Column 3)	l r	JWALL			OMALL	ADDI-	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	_:	
	Independent	•	Minus ***			=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
								TOTAL	,	OR	TOTAL ADDIT. FEE		
6.4		(Column 1)			ADDIT. FEE			ADDII. PEC					
		CLAIMS	•	HIG	mn 2) HEST	(Column 3)	ו ר	· · ·	ADDI-	. !	· · · · ·	ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE	, ,	RATE	TIONAL FEE	
	Total	* · · · · · · · · · · · · · · · · · · ·	Minus	**		=		X\$ 9=		OR	X\$18=	_	
ME	Independent	•	Minus	***		=		X40=		OR	X80=	-	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]			On			
							+135=		OR	+270=			
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
٠.		(Column 1)		(Colu	ımn 2)	(Column 3))		•				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	11	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=			X80=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDEN				T CLAIM]	740=		OR		-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE													
		nber Previously Pa					er fou	and in the ap	propriate bo	x in co	olumn 1.		